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Foreign Priority claimed 35 USC 119 (a-d) conditions yes no Met after met Verified and Acknowledged Examiner's Signature Initials				STATE OR COUNTRY TX	DRAWING CLA		TOTA CLAI 29	MS	INDEPENDENT CLAIMS 6
ADDRESS 20350									
TITLE Ring map discove	ery an	d validation method ar	nd syster	n for optical ne	etwork a	applicat	ions		
RECEIVED	FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT No for following:					All Fees 1.16 Fees (Filing) 1.17 Fees (Processing Ext. of time) 1.18 Fees (Issue) Other Credit			